

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		01491	11/30

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/30
2	✓	✓	11/30
3	✓	✓	11/30
4	✓	✓	11/30
5	✓	✓	11/30
6	✓	✓	11/30
7	✓	✓	11/30
8	✓	✓	11/30
9	✓	✓	11/30
10	✓	✓	11/30
11	✓	✓	11/30
12	✓	✓	11/30
13	✓	✓	11/30
14	✓	✓	11/30
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48	✓	✓	11/30
49	✓	✓	11/30
50	✓	✓	11/30

Claim	Final	Original	Date
51	✓	✓	11/30
52	✓	✓	11/30
53	✓	✓	11/30
54	✓	✓	11/30
55	✓	✓	11/30
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98	✓	✓	11/30
99	✓	✓	11/30
100	✓	✓	11/30

Claim	Final	Original	Date
110	✓	✓	11/30
111	✓	✓	11/30
112	✓	✓	11/30
113	✓	✓	11/30
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144	✓	✓	11/30
145	✓	✓	11/30
146	✓	✓	11/30
147	✓	✓	11/30
148	✓	✓	11/30
149	✓	✓	11/30
150	✓	✓	11/30

If more than 150 claims or 10 actions  
staple additional sheet here

(LEFT INSIDE)